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ON THE THERAPEUTICS OF DISEASES OF THE STOMACH.

BY PROFESSOR OPPOLZER.

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WE are far from knowing all the morbid changes to which the stomach is subject, nor are we always able to diagnosticate with certainty those of which we understand the pathological anatomy. The practitioner has often to treat derangements of the digestion, whose organic causes he cannot determine. It will not be considered improper, therefore, if in the course of these remarks I often make use of the words difficult digestion, excessive formation of acid, and flatulence. I am perfectly convinced that all these functional disturbances have their origin in some organic change, though in the present state of medical knowledge these changes are not known to us. Who, for instance, can describe the changes which occur in the rennet cells? Who knows the changes of the organic muscular fibres which surround the gastric glands? Who can explain the derangements of innervation, or the minute changes in the blood, all of which have a special influence in the quantity and composition of the gastric juice? Even the changes in the mucus of the stomach, or of the epithelial cells, have not as yet been sufficiently studied, and there is no doubt that in them also originate derangements of the digestion.

In disease of the stomach, the regimen, in the widest sense of the word, is by far the most important part of the treatment. I will therefore begin with my experience of the dietetic treatment of affections of the stomach.

Milk is among the most important of dietetic remedies, and one in which I have made most observations. I have used cow's milk in all cases, and, provided it was not disagreeable to the patient, always preferred sour milk to new milk, or even to buttermilk; for in sour milk the casein being very finely divided, is more easily

digested, while in the other forms of milk, if taken in any quantity, it is coagulated into large lumps, which impede the digestion considerably.

By some patients, sour milk was taken more willingly than curd, while others preferred to dissolve this in cold water, and take it as a drink. But most patients took simple cold milk; others preferred boiled milk, either warm or cold. Skimmed milk was always used, in order that it might be free from fat, and the buttermilk was passed through a fine sieve to separate from it all the small particles of fat which it contained.

In diseases of the stomach, milk must at first be administered in small quantities, especially if the stomach habitually rejects what it takes. I generally begin with a few spoonfuls, and increase the quantity only when the stomach readily bears what is given. Some patients took from four to six pints of sour milk daily, which quantity was divided into four portions, that sufficient time might be allowed for the digestion of each portion. New milk I gave always in small quantities, and preferred administering it frequently, to prevent the formation of lumps of casein.

With some patients, water-brash was produced during the milk regimen. In these cases, I gave small quantities of carbonate of magnesia, at the time it was likely to come on. With others, diarrhœa occurred; and in such cases I generally ordered a small dose of prepared chalk, after taking the milk.

In severe diseases of the stomach, especially with obstinate vomiting, I gave milk alone, especially sour milk. Those patients who bore milk diet well were allowed milk pap made with groats, rice, or fine arrowroot meal; some, under the milk regimen, bore weak broth, with the yolk of an egg.

In many cases I have seen chronic inflammation of the stomach, erosions, perforating ulcers, the vomiting of pregnant women who have disease of the womb, the obstinate vomiting after typhus (which is sometimes, though not always, caused by inflammation of the mucous membrane of the stomach), the vomiting which occurs sometimes in boyhood, without evidence of any inflammation of the stomach, and likewise that of hysterical persons, cured by a milk regimen. Cancer of the stomach cannot, it is true, be cured by a milk diet, though in some cases this procured relief to the patient. Moreover, sour milk is the only food that some sufferers from cancer of the stomach are able to bear.

With a few persons suffering from disease of the stomach, who could not bear a milk regimen, I tried raw meat. Minced veal was made into small balls, which the patients swallowed generally without hesitation. With a few there existed an unconquerable disgust to this diet, which prevented a trial of it.

In one case I used exclusively cold victuals—namely, cold meat. It was the case of a man who, whenever he took warm food, was

seized with pain in the stomach, and consequent vomiting; cold food caused him no trouble. After living for two months solely on cold meat, he tried warm food, which he then bore without difficulty.

We often hear persons, leading a sedentary life, complain of labored digestion; after every meal, but particularly after dinner, they feel a weight in the stomach which torments them for many hours. In such patients regurgitations occur, which have the taste of the last meal, taken many hours before; also pyrosis, and the sensation of a foreign body lodged in the throat behind the larynx, which they try in vain to expel. Flatulency of the bowels occurs, and the stools become irregular. They feel themselves indisposed to any mental labor, as their heads are affected, and even the exercise so necessary to them becomes disagreeable; after dinner, they feel like lying down and sleeping. In the right season, I sent such patients to the mountains, where moderate excursions on foot, and the mountain air, agreed with them so well that for the most part they returned with good digestion and the appearance of better health.

Herewith ends my experience in the dietetic treatment of diseases of the stomach. I now pass to the remedies I have used. Every year I send patients to the Bohemian watering-places, especially to Karlsbad,* Marienbad, Franzensbad, and recommend to some to use cold baths.

To the cold-water cure I submit those patients who, in consequence of good living, with a sedentary mode of life, have deranged their digestion. Gouty patients, with affections of the stomach, who for fear of congestion, or on account of bleeding hæmorrhoids, dared not try Karlsbad or Marienbad, were benefited by the cold-water cure.

Waters rich in carbonic acid, or in the alkaline carbonates, as the baths of Seltus, Giesshübel, Bilin, and soda-water, I used with good effect where there was tendency to acidity of the stomach, and in the sympathetic vomiting accompanying gall-stones, renal calculi, diseases of the uterus, and pulmonary tuberculosis. In using them, I took particular care that the stomach should not be distended with gas, and that they should be taken in small quantities.

I never found it necessary to resort to general bleeding in diseases of the stomach. I have often seen good effects from local bleeding, in pain in the epigastrium which was increased on pressure, consequent upon inflammation of the stomach, or ulcers pro-

* *Karlsbad*, 45–50° R., contains principally sulphate of soda, chlorides and carbonates of metals; carbonic acid, and traces of iodine.
Marienbad is rich in sulphate of soda, chloride of soda, carbonate of soda, with carbonate of iron dissolved in carbonic acid.
Franzensbad contains, besides sulphate of soda and alkaline carbonates, much carbonic acid, and particularly iron.

ducing inflammation in their neighborhood, or in the diaphragm. But local bleeding I only used in strong persons, and when great tenderness existed.

I have often with good success employed heat and cold. I have used iced water, or small pieces of ice, in inflammation of the mucous membranes of the stomach, and in hæmatemesis. The vomiting, sympathetic of diseases of the kidneys, uterus, or brain, was frequently diminished or quite relieved by small pieces of ice.

Internally, I have employed cold compresses, beginning always with merely cool water, and increased the temperature gradually to that of ice. If ice is used at first, violent movements in the stomach and intestines may be brought on, which, especially in gastric hæmorrhage, are very injurious. Warmth, by means of warm towels, poultices and baths, I found very useful in simple and sympathetic cardialgia.

As irritants to the skin, I employed pieces of flannel, or rabbit's or hare's skin with the fur innermost, or aromatic plasters, and mustard. I ordered the first, in tendency to cardialgia during the cold months; the others, in slight pain of the stomach depending on chronic inflammation.

In many cases of painful affection of the stomach, I found narcotics of great use. Opium and its preparations are of surer benefit in other painful disorders. In ulcers of the stomach I preferred opium to its tinctures. In patients suffering at the same time from obstinate constipation, I was obliged to resort to belladonna or conium. These also I have seen followed with good results. In danger of perforation of the stomach, the best agent is opium, which stops peristaltic motion, thereby favoring the chance of adhesion. I have likewise found opium useful in the affections of the stomach in drunkards, in their cardialgic and chronic vomiting. The water of the cherry laurel is useful merely in slight pain, such as that which so frequently occurs in catarrhal inflammation. Of all the narcotics, it is the one which disturbs digestion the least.

I used emetics only in indigestion, and that with all necessary precaution. Purgatives are often necessary; when cold or laxative enemata were sufficient, I omitted the use of cathartics; in some cases, however, I was obliged to resort to them, namely, in sympathetic vomiting where constipation existed. Even in some cases of ulcers of the stomach, I remarked that, in such cases, aloes and epsom salts in small doses were borne the best, while castor oil and senna were injurious.

I found nitrate of bismuth, which is so generally used in all cardialgias, only to be relied upon in those pains of the stomach which are produced by excessive acidity; in such cases its effects are more lasting than those of the antacids. The antacids I used were the carbonate of magnesia, carbonate of lime (in the form of testa præparata, or lapilli cancrorum), carbonate or bicarbonate

of soda. They alleviate the pain of an excessive formation of acid, which is generally the result of fermentation. It is best to administer these remedies after eating, as the water-brash occurs, for taken before meals they may easily disturb the digestion, as is proved by experiments in artificial digestion. In ulcers of the stomach of any kind, I always prefer the carbonates of the earths to those of the alkalies, because they irritate less the surface of the ulcers. When, in consequence of an excessive formation of acid, diarrhœa is produced, I prefer the carbonate of lime to all others.

It is very important, with children especially, as also in cases of excessive formation of acid in those suffering from tubercles, in diseases of the brain or of the uterus, in ulcer of the stomach, and cancer, in distension of the stomach following a narrowing of the pylorus, to neutralize the acid, for it causes great distress, and can even produce a softening of the stomach, which, though occurring mostly after death, can also take place during life, as the occurrence of pneumothorax after perforation of the diaphragm proves. The symptoms which are mentioned in cases of so called softening of the stomach in infants, are produced by an excess of acidity; the children show their suffering by their cries, and the drawing up of their feet; they throw up green matter, with a very acid reaction, and pass green watery stools. Alkalies, especially carbonate of lime, and the vegetable astringents, are the best remedies for it.

I found vegetable astringents, such as tannin, extract of rhatany, extract of willow bark, extract of logwood, &c., very useful in excessive acidity, and secretion of mucus, also in hæmorrhage from the stomach.

In cases of hæmorrhage, in which neither cold nor astringents were of any use, I have employed sugar of lead with very good results. I gave it only in doses of one-quarter grain, to prevent vomiting, which takes place easily if larger quantities be given. Salted substances, as sardines and caviar, also weak spices, as horse-radish and mustard, I used successfully in imperfect digestion when not of long standing. I have seen good results follow small doses of nux vomica and of ipecac in obstinate cases of imperfect digestion. I administered these remedies shortly before meals.

I have used bitters, such as the centaurium minor, gentian, extract. cardui benedicti, herba trifolii fibrini, quassia, colombo, rhubarb, &c., in imperfect digestion, with chronic catarrh of the stomach, especially in weak and anemic persons. I found the use of iron beneficial in such persons, who can easily bear the milder preparations, as the lactate, carbonate and ammonio-chloride.

The medicines which stimulate the stomach, the bitter remedies, and the preparations of iron, ought never to be administered when symptoms of inflammation exist. The carminatives, of which I used fennel water and anise water internally, and the balsamum

vitæ Hoffmani* externally, alleviated regurgitation, which, in more than one case, produced a sense of constriction, palpitation of the heart, oppression, and occasionally pains in different parts of the body, which the patients ascribed to wind. Creosote, in doses of a quarter to half a drop, taken before meals, was useful in preventing flatulency consequent on fermentation. I have also seen the use of this remedy in some cases alleviate vomiting in Bright's disease. On account of its bad taste, however, many people take it very unwillingly.

Vegetable charcoal is useful in the putrid decomposition of the contents of the stomach, with eructations having the taste of rotten eggs, as in closure of the pylorus, or suppurating cancer. As common wood coal generally contains splinters, which cause irritation, it is best to use coal made of burnt bread.

In chronic inflammation of the stomach, I have given with success small doses of iodide of potassium, from three to four grains daily. In two cases of obstinate vomiting, after many other remedies had been used in vain, I tried small doses of tincture of iodine, three or four drops daily, and with success.

I tried aqua regia (according to Prout's recommendation), in two cases in which a feeling of weight in the stomach after eating was complained of, with heaviness of the head, flatulency, and water-brash, and in which there was much loss of strength; in these cases oxalate of lime was found in the urine. The result was successful.

OPERATION FOR IMPERFORATE RECTUM NOT IMPRACTICABLE.

BY C. E. BUCKINGHAM, M.D., OF BOSTON.

[Communicated for the Boston Medical and Surgical Journal.]

WILLIAM, the son of Wm. Lund, was born on the 6th of December, 1851, and on the morning of the following day the nurse reported that there was an obstructed anus. On examination, the cleft of the nates was found sufficiently marked, but there was no evidence of an anus, either by protrusion or discoloration. During the night there had been occasionally bilious vomiting, and latterly straining, as if to evacuate the bowels. There had been no discharge of urine. Had taken no food of consequence, but had tried to nurse. The countenance looked badly, and there was lividity about the mouth and eyes. Was somewhat stupid; did not cry, but was constantly moaning.

Operation thirty-two and a half hours after birth, with the assistance of Dr. Henry Osgood Stone. The child was held upon the lap of the nurse, its nates resting over the right knee, and the

* A compound of the ethereal oils of lavender, cloves, cinnamon, lemon, mace, marjorum, thyme, orange flowers (also rue and amber), and balsamum Peruvianum, macerated in alcohol.

knees raised as for lithotomy. I made an incision in the centre of the cleft of the nates from the scrotum to the coccyx, and crossed this with another, at right angles, from the tuberosity of one ischium to the other. The dissection was carried on with a sharp-pointed, straight bistoury, backward and a little to the left, for two inches. No evidence of the neighborhood of the rectum being obtained with the finger, I passed a hydrocele trocar into the wound, in the same direction, a half inch further. On withdrawing it, meconium was found upon it. The wound was then enlarged with the knife, and a female cathether was introduced, through which an enema of warm water was administered. There was immediately a fair discharge of meconium, and a slight discharge of urine.

The child cried but little, and the whole loss of blood was not much more than two drachms. A few spoonfuls of milk and water were given, and it was dressed in the usual manner, no application being made to the wound. Half an hour later, the moaning had ceased, the child looked brighter, and there was a profuse dejection.

5, P.M.—Has had two full evacuations, but has not vomited nor passed urine. At 5, P.M., on the 8th, I introduced a sponge tent two and a half inches, with some little difficulty. During the attempt at introduction, the efforts of the child to evacuate the bowels produced an audible passage of air through the penis, which was rendered visible by the spattering of urine, and perceptible to the hand, which was laid above the pubes.

Dec. 9th.—Removed the tent, immediately after which, he passed a large amount of almost colorless urine in a jerking stream. No passage, either fluid or solid, by the anus at the time.

I have the regular reports of each visit, but select only such as are of particular consequence.

Dec. 14th.—Tried unsuccessfully to introduce a bougie of more than one fourth of an inch in diameter. Umbilical cord has not yet separated.

16th.—Introduced a female catheter with difficulty.

25th.—Free dejection. Passed a bougie of ebony, seven sixteenths of an inch in diameter.

27th.—In pain all night. Tumor in left side just over short ribs, size of a small walnut. Nurse says, she discovered it last night.

29th.—Tumor increasing in size. Passed bougie of 25th again with ease. Some bloody pus followed it.

Jan. 1st, 1852.—Opened tumor, which discharged an ounce of pus.

7th.—For several days the left side of the scrotum has been swelling.

13th.—Opened small abscess in front of scrotum. Child weighs 9½ pounds, an increase of 2½ pounds since birth.

22d.—Bougie has not been introduced since the 16th. Has two

dejections daily, and sometimes more. The scrotal abscess is well; there has been a slight gathering again on the left side, which broke yesterday and does not discharge to-day.

Feb. 13th.—No bougie since Jan. 16th. Three dejections. Weighs 11½ pounds.

March 11th.—Gains daily. Nurses well. Bowels open freely every day, without medicine. No bougie since Jan. 16th. Has gained another pound.

Soon after this last report, the child left town for Gardiner, Me., and returned on the 28th of May. Saw it that afternoon. Looks well, and is fat and hearty. About the 1st of May, discharged urine and fæces mixed, by urethra; but has not since. For several days last week, had diarrhœa, which stopped on the 21st. No instrument has been passed into the anus, which is red and shining about its edges, and bled a little on separating the nates.

Aug. 5th.—Has six teeth. For several weeks has had diarrhœa, and fæcal matter passes by the urethra, as much as by the anus.

In the fall, the family removed to Malden.

Oct. 21st, 1857.—Saw Mrs. Lund, the mother, at 36 Leverett Street. She informs me that her boy upon whom I operated is still living, and is generally in good health. He occasionally has pain in the pubic region, but she considers him well. There is, however, at times, difficult micturition. The family still reside at Malden.

The above case is given, because it was stated, as appears by the records, at the Boston Society for Medical Improvement, as the belief of one gentleman, "that in the present state of the art it is better that a child born with either of these imperfections (*of anus or rectum*) should die without this operation, although it must occasionally be performed in deference to established opinion." The question may be asked, if my case is not one of those exceptions which are said "to prove the rule." If it be so, then the rule is one of those which should be honored in the breach. An *ex cathedrâ* statement, as that from an officer of the Massachusetts Medical College is, and ought to be, may have an unfortunate effect upon many a timid physician, who dares not think for himself, and who would hesitate to ask the aid of one who denounced the operation. If there has been one successful case, which the profession have not known, it is very probable that in the case-books of other private practitioners there are other such. It is very likely that they have not been brought to light, because physicians have had no reason to suppose them peculiarly fatal until now.

The case reported by Dr. Jones, at the Suffolk District Medical Society, has been spoken of as if it were not a fair case of imperforate rectum, because the sphincter contracted upon the finger. If the child had died without a *post mortem*, would any one have questioned its being a *bonâ fide* case? The recovery is the only evidence that there was merely a septum across the gut.

The case which I have reported is one of imperforate anus, absence of the lower part of the rectum, and communication with the bladder.

So far as my own reading extends, I do not find any great distinction made by writers between imperforate anus and imperforate rectum. The names do not convey a just idea of the malformations, particularly if, by the name, one is to decide upon the propriety of attempting to save life.

In the *Edinburgh Monthly Medical Journal* for January, 1857, which must have been seen by a large number of the members of the profession in this city, is a case, precisely like the above. The patient is still living at the age of 36 years, and in perfect health.

Samuel Cooper not only thinks the operation justifiable, but says "it is the surgeon's duty to do everything in his power to afford relief," and then goes on to describe the operation. He follows with the statement that "by such proceedings many infants have been preserved," in some of whom incisions two inches and more have been made, and alludes to cases by Wolff, Hildamus, La Motte, Roonhuysen, Hutchison, Benj. Bell and Miller.

It is certainly remarkable that these cases should have escaped the notice of the gentlemen connected with the only institution for instruction in medicine and surgery in active operation in this city at the present time; and it will be equally remarkable if the officers of other schools should arrive at the same conclusion as they have respecting the operation.

RUPTURE OF THE GALL-BLADDER.

[Reported to the Medical Society of the County of Albany by S. H. Freeman, M.D., and communicated to the Boston Medical and Surgical Journal by Levi Moore, M.D., Secretary.]

The patient was a gentleman retired from business, of vigorous constitution, florid complexion, and 65 years of age. He had usually enjoyed good health and spirits, with the exception of occasional attacks of cardialgia and other minor symptoms of dyspepsia.

I was first called on the 15th of October, 1857, to visit Mr. K., who was supposed to be suffering from an ordinary attack of colic. Found him vomiting and suffering occasional paroxysms of spasmodic pain, which he referred to the pit of the stomach and to the region of the umbilicus. There was no tumefaction of the bowels, nor tenderness on pressure. The tongue was slightly coated brown, moist; pulse 80, full and regular. The vomiting and pain were soon relieved by the immediate administration of a dose of dilute chloric ether, followed by the exhibition of small doses of calomel and opium. He enjoyed a comfortable night, and the following morning had a free bilious evacuation from the bowels.

On my second visit the next day, at noon, I found him sitting in his easy chair, quite comfortable; and, indeed, he expressed him-

self "perfectly well." During the afternoon, however, he had a return of violent intestinal pain and vomiting, discharging with the contents of the stomach about a pint of grumous blood, which was followed soon after by a copious bloody passage. He was, again, soon relieved, and had no return of farther unpleasant symptoms, with the exception of occasional paroxysms of pain, until a fortnight from the time of the first attack, when I was hastily summoned, at night, to visit him. I then found him *in articulo mortis*—the surface of his body was covered with cold perspiration, and though he conversed intelligently and calmly, his pulse, which the evening previous was perfectly normal, was now rapid, irregular and feeble; and in half an hour from the time I entered his room, he gently breathed his last.

Autopsy, 56 hours after death. On opening the cavity of the abdomen, there appeared a mixture of sanguineous fluid and bile, amounting, by estimate, to three or four pints. On farther examination *eleven* large biliary calculi (resembling chestnuts in size and shape) were found in the peritoneal cavity and in the gall-bladder. The gall-bladder was adherent to the duodenum and transverse colon. Its cavity was more than double the normal capacity, and its walls were much thickened. The *ductus choledochus communis* was greatly enlarged, and about midway between the fundus and the duct there was a free opening, about an inch and a half in diameter, through which the contents of the bladder had escaped into the cavity of the abdomen. The surrounding parietes were also much thickened, but presented no well-marked appearance of recent inflammation or ulceration. The other organs, with the exception of the liver, which presented the pathological condition of incipient cirrhosis, appeared healthy.

Remark.—This case derives especial interest from the obscurity of the diagnosis; and though I had inferred that the *liver* was probably the *seat* of the *disease*, the absence of tenderness and continued pain in the right hypochondrium and at the scrobiculus cordis, the want of an icteric tinge in the conjunctiva, and the regular bilious evacuations, seemed to preclude the possibility of an obstruction of the gall ducts, nor in any way determined the precise *nature* of the disease.

NEW WORK ON HUMAN HISTOLOGY.

[Communicated for the Boston Medical and Surgical Journal.]

Messrs. Editors,—Allow me to introduce to the notice of your readers a work which for many reasons it seems to me should be in the hands of every physician. It is that just completed by Professor Peaslee, on Human Histology. Heretofore the subject of Minute Anatomy and Physiological Chemistry, upon which princi-

pally the great advancement in modern physiology rests, has been unavailable to medical men and students generally. The works of Simon, Lehmann, Robin and Verdeil, Kölliker, Hassall and others, were before them, but some of these were still locked up in a foreign language. Others were too voluminous, being swelled to a great size from the full details of experiments, and in some instances controversial matter; and no one covering the whole ground. They are all admirable treatises upon particular divisions of the wonderfully accurate and minute analyses of the entire body, that has been so successfully accomplished by the profession in the short space of half a century. We would call attention to this work for many reasons, a few only of which will sffice.

There is need always, and as much now as ever, that we should know distinctly upon what our science rests. Or, in other words, we need a precise knowledge of physiology, upon which the whole fabric of medical science reposes. It is not enough that we can say that we know who has accomplished an accurate and rigid chemical analysis of the fluids and solids of the body; or that we can say by whose protracted and laborious researches a full insight of the most minute structural elements of the economy has been obtained; but we must know for ourselves what are the results of this analysis, and what this minute structure is. The young physician and the medical student cannot take such a work as the great repository of physiological knowledge by Carpenter, or indeed any modern physiology, and read it understandingly, or in such a way that it shall be, as it ought, the foundation upon which all his medical knowledge shall rest, without having first prepared himself by carefully studying the subject of histology in a comprehensive way. He needs, first, to know what are the chemical and physical elements that are subject to vital laws; and, above all, he needs to know what are their combinations and arrangement in the ultimate structure of parts.

With an untiring zeal and unremitting labor, Professor Peaslee has reduced the continually accumulating material on these subjects to a connected form, that covers the whole ground, and within a little more than 600 pages gives a good knowledge of what has cost so many laborers a great portion of their lives to establish as known. But more than this should in justice to him be said; he has not merely compiled, but has in a most judicious manner compared the differences of opinion that must occasionally be found in a science that is so rapidly expanding as is our own at this day, and given what will perhaps, to all disinterested persons, seem the most correct conclusion.

With a work of this kind in the hands of the profession to open the way for physiological study, faithfully studied, it would be easy for us all to understand those great principles of pathology that are so necessary to our success in diagnosis. As my object is not to

review or criticise the valuable production of Professor Peaslee's scientific acquirements, I will not occupy more time, but give the testimony of one who, having perused it carefully, cannot refrain from saying that it is capable, if properly used, of meeting a want now experienced by the profession, and would, if generally read, assist materially in putting us more firmly upon the physiological foundation upon which alone the science of medicine can stand.

We ought not to omit that the work is highly and judiciously illustrated by well-executed wood cuts—a matter of great importance where the details of structure are so constantly the subject.

EDWARD E. PHELPS, M.D.

Bibliographical Notices.

Indigenous Races of the Earth; or New Chapters of Ethnological Inquiry, &c. By J. C. NOTT and GEORGE R. GLIDDEN. 8vo. 1857.

Catalogue of Human Crania in the Collection of the Academy of Natural Sciences at Philadelphia. By J. AITKEN MEIGS, M.D. 8vo. Philadelphia: 1857.

THE science of ethnology, like most other sciences, presenting at first but a few obscure outline traces, scarcely attracting the attention of any one, has gradually grown into importance. Deriving light and strength from various kindred branches of study, it has assumed a definite form, and has engaged and is now engaging some of the best minds of the age; and the results of their researches are becoming matters of general interest. The original derivation and subsequent distribution of mankind is a subject for philosophical research; and the solution of the question can be arrived at only by a long series of profound and unbiassed investigations in civil and natural history, language, archæology, geography, &c. At first it might seem hopeless to go back to periods even beyond those concerning which nothing but unwritten monumental history is extant, and be able to deduce satisfactory conclusions; and that we must of necessity rest content with the very brief and general statements of Holy Writ—statements which have always seemed to us most extraordinary as setting forth great general truths in such a manner as to admit of all the dilatations of progressive scientific research without conflicting with those truths; giving evidence of an original insight into our physical conditions which could not have been attained, and is not yet comprehended, by human wisdom. In astronomy and geology especially, great advances have already been made in deciphering the details of the great general statements in regard to the celestial system and the structure of our own little planet, giving a new interpretation to previously-received opinions; and we ought to be prepared for similar modifications in regard to the history of our race. To foreclose the whole question is as unphilosophical as it would be futile; and while we feel assured that every revelation of science will only elucidate and confirm the cardinal statements of the Bible, yet past experience in other branches of science has led us to expect to be compelled, by and by, to modify, in some respects, the notions of our race which were so long held un-

questioned. The investigation is scarcely touched as yet, and we do not feel that any positive conclusions have been arrived at, except, perhaps, that the duration of man on the earth has been much longer than usually estimated: but we are sure that the unqualified rejection, and we might say denunciation of new speculations, has afforded some just ground for the scoffing sneers which Mr. Glidden bestows upon "Theologers," as he is pleased to call them, and must in the end recoil disastrously upon their own heads.

The book before us is a very important one in relation to this subject. It is made up of various papers by several authors, very different in the style and animus in which they are presented. No matter what may be the predilections of the ethnologist or the general reader who consults it, he will find an immense fund of curious facts, and material, from the most recent sources, which have required great research, and which have hitherto been accessible to only a favored few. It is a sort of cyclopœdia, posting up the facts bearing on ethnology to its date. It shows how light is to be derived from various sources, and how inquiries entirely independent of each other educe similar answers, thereby giving a probability at least to their combined result.

In a journal like this, there is not space to give a full analysis of this large volume; we can only give an index of its contents.

The prefatory remarks include a letter from Professor Agassiz, in which he shows that the question of races attaches to other animals quite as much as to man; and holds that they should all be subjected to examination by the same rules. In regard to the proof of unity from affinity of language, he brings some examples to show that similar proof exists to unite animals universally admitted to be different species, as is applied to man.

Professor Leidy, in another letter, presents some facts which might bear in favor of the existence of man at a geological epoch anterior to the present: but the inferences seem to us rather feeble and far-fetched.

M. Maury, of the French Institute, gives an essay on the distribution and classification of tongues, and their relation to the distribution of man on the earth. His theory is, that from the outset there were various types of language, by the modification of which, all subsequent dialects were formed: that linguistic types are not now formed any more than new types of animals. In this, he considers it as an admitted point that the word Adam means mankind in general, and hence assumes that there were several primitive men, each of which had a language given him.

A chapter by Francis Pulszky, entitled "Iconographic Researches on Human Races and their Art," is replete with curious facts, fully and beautifully illustrated by wood cuts and lithographs. His object is to show the permanency of races by the characteristics of their art, and to illustrate the permanent traits of a race as exhibited by their delineations. To use his own words in summing up, "painting and sculpture are always the result of a peculiar artistic endowment of certain races, which cannot be imparted by instruction to unartistical nations. This fitness or aptitude for art, seems to be altogether independent of the mental culture and civilization of a people and no civil or religious prohibitions can destroy the natural impulse of an artistical race to express its feelings in pictures, statuary and relief."

Chapter III., by J. Aitken Meigs, is an able paper on the Cranial

Characteristics of the Races of Men. It is founded on the great collection of Skulls made by Dr. Morton, which Dr. Meigs has recently re-arranged, labelled and catalogued. He first gives a sketch of the science of cranioscopy from its origin with Blumenbach, seventy years ago. Twenty years before his death, Dr. Morton found that he could neither borrow nor buy, in Philadelphia, skulls to represent the five great races of men. This instigated him to supply the deficiency, and at his death he had accumulated 867 human shulls, and 601 of the inferior animals. Many others arrived afterward, and the collection now numbers 1035 crania, representing more than 150 nations, tribes and races. It is fortunate that so able and zealous a cranioscopist has succeeded to the care of this wonderful collection, and to a continuation of the researches so inopportunely interrupted by death. We cannot enter into the subject farther than to produce a few of the conclusions educed by Dr. Meigs. He concludes that cranial characters constitute an enduring, natural, and therefore strictly reliable basis upon which to establish a true classification of the races of men — that the persistence of forms through time renders it difficult, if indeed possible, to assign to the leading cranial types other than specific values —that in the present state of our knowledge, however, we are by no means certain that such types were primitively distinct; —that the lower forms are found in the regions of excessive cold and excessive heat, the higher occupying the middle temperate region — that cranial forms are inseparably connected with the physics of the globe.

Chapter IV. is entitled "Acclimation: or the comparative influence of climate, endemic and epidemic diseases on the Races of Men," by Dr. J. C. Nott. This is a subject which interests the medical profession more especially. The object of Dr. Nott is to show that each type of mankind has its appropriate station like other animals and plants, and that it cannot by any process, however gradual or long continued, become habituated to any other. In doing this, he passes by the influence of strictly physical causes which has been so fully set forth by Pritchard and others, and considers the *diseases* which are peculiar to particular races, and also the effects of *medical climate* upon races dwelling in physical regions to which they are strangers: such, for instance, as the exemption of the black from yellow fever in hot climates, and the universal liability of the white to contract it. He illustrates his point by the protracted residences of the English in India, the Dutch in Batavia, the French in Algeria. His conclusions are, that the types of man have as well-marked distinctive characters as any which divide species in other genera: that each type has its own physiological and pathological characters, which are peculiarly affected by both physical and medical climate: that no race of man can be regarded as cosmopolite, and that were it not for the expedients which reason enables him to adopt for his protection, the types of man would be as limited in range as are any of the higher species of animals: and, that any one race has, or ever can be, assimilated to all physical or all medical climates, is a hypothesis unsustained by a single historical fact, and opposed to the teachings of natural history, man forming no exception to the universal law of limitation to prescribed realms. The article contains a fund of well-digested facts, and is well worthy of study.

The last and longest article is by Mr. Glidden, entitled the "Monogenists and the Polygenists": in other words, it is a discussion of the doctrines of the Unity and Diversity of the Human Races. This no doubt is intended as the crowning essay of the volume. What shall we say of it? His object is to sustain his already well-known position as a polygenist, or believer in many original types of mankind. This much at least may be said, that a vast amount of archæological learning is displayed, both in the text itself and in the numberless references to other authors and citations from them. Something curious may be learned from almost every line, and whoever will undertake to read it for individual facts will be well repaid. But as an argument arranged so as to be apprehended, expressed in plain English and in a spirit calculated to invite conviction, we consider it a failure. Throughout, it is so encumbered with parenthetic and divergent propositions, new-coined words, new orthography, and constant self-aggrandizement by the introduction of distinguished men as his special friends, as to become both misty and disgusting. For its rhetorical vices we consider it worthy of all reprobation. In spirit, with the exception of himself and a few other Egyptologists and archæologists, he writes down all other men numbskulls and fit subjects for his ribaldry. His uncalled-for jeers at Scripture history cannot fail of the reprobation of all good men. See, for instance, his allusion to Paul at the Areopagus. Well might he have exhibited some of that "decent respect for the opinions of mankind," which he arrogates to himself. It is infamous, as well as impolitic, to trifle with what men hold sacred, and will inevitably call out resistance, and shut the ears to argument. The alleged effect of the greased cartridges in exciting the Indian rebellion, is an example in point. However impregnable may be his argument, it will fail of carrying conviction, from the ungracious and scoffing manner in which it is presented. In short, for self-conceit, bombastic pedantry and heartless trifling with the cherished opinions of Christendom, a parallel to this paper can scarcely be found. It indicates anything but the true scholar and philosopher. Nevertheless it is well worth the reading, and abounds in points which, like the accompanying papers, bear most strongly upon the side of the diversity of races.

As a book, it is well got up, and filled with well-executed illustrations, though confessedly not in all respects up to what was promised. But the numerous attempts, by which the reader is constantly offended, to show that his subscribers have got their money's worth, indicate that Mr. G. was quite as anxious to make up a book for sale as to advance knowledge.

A. A. G.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, NOVEMBER 26, 1857.

MARRIAGES OF CONSANGUINITY.

We commend the following appeal to the consideration of the profession generally. The subject has long been esteemed one of the very highest importance, and has elicited much thought and observation.

We have called attention to it long since, and trust that Dr. Bemiss will receive all the aid possible in making up his Report.

"The undersigned, Committee of the American Medical Association on Influence of Marriages of Consanguinity upon Offspring, solicits the aid of the medical profession throughout the Union in collecting facts upon this interesting subject. The points of information more especially desired are:—

"1st. The degree of consanguinity of parties, and whether by father or mother's side.

"As first, second, third or fourth cousins; or, more rarely, uncle and niece or brother and sister.

"2d. The approximate date of marriage.

"This is only requisite in order to show whether the fruitful period is passed and the case complete in its results.

"3d. The constitutional diathesis and temperament of each parent, their occupation, and such habits or circumstances as are in the opinion of the observer calculated to influence the normal development of offspring.

"Where the parties are personally known to the contributor, the Committee requests the color of the hair, eyes and complexion to be noted.

"4th. The number, sex and condition of children produced by each marriage.

"5th. The number and sex of children who have died young, their ages at death, and causes when known.

"It is probable that in very many cases all the points of information required above, cannot be obtained; it is hoped that those who favor the purposes of the reporter will not suffer an inability to procure *all* the facts to deter them from furnishing such as may be within their reach. The Committee desires to accumulate a mass of statistical truths whose aggregate will determine, beyond question, whether marriages of consanguinity are in the main prejudicial to offspring; and that he may accomplish this purpose, he begs his co-laborers to report the instances of such marriages within their various circles of observation without selection, whether followed by well-developed or imperfect issue, or sterility. Contributions are requested to be forwarded as early as practicable, but will be accepted until the first of April next.

"N. B.—Names of parties not desired, as all personal allusion by which either contributors or their subjects of observation may be designated, will be avoided in the Report.

Louisville, Ky. S. M. Bemiss, M.D."

INJURIES BY FALLING FROM SCAFFOLDS.

We have been struck with the frequency of severe and even fatal accidents, lately, to laborers employed about buildings, by falling from a height, both inside and outside of such structures. There are several causes for these casualties: such as sudden giddiness, faintness, a mis-step, the giving way of supports, &c. No laborer *who is liable* to attacks of dizziness or faintness, should ever ascend to perilous heights; if he values his life, he ought to restrict his work to a lower level.

There seems not the shadow of an excuse, at the present time, for

accidents of the nature we have noticed, when attributable to the last cause we have named. Every now and then we hear of a staging breaking down, carrying with it such and such persons, some of whom are maimed, it may be for life, whilst others are killed outright. Generally, these men have wives and children dependent upon their daily exertions, to whom it is even worse than death to have their guardian and provider die.

We take occasion to allude to these matters, because not only have the daily papers teemed with reports of casualties of this sort, but because we personally were lately cognizant of an accident from faulty and weak scaffolding, not many steps from our own residence. When this staging was first erected, we remember looking at it with the presentiment that it would not be quite safe even to pass underneath it, much less to mount and stand upon it. In a few days, a portion of the foot-boards gave way beneath a workman, who fell to the side-walk, and sustained a fracture of the wrist. A slight variation in his mode of descent might have made this a fracture of the cranium or of the neck.

Now, so far as security of foothold, and solidity of structure throughout, are concerned, there need be no risk incurred by workmen or overseers, whether the inside or outside of a building is to be repaired or painted. There has lately been devised and perfected a scaffold so completely secure when erected, and so admirable in its construction, that it both constitutes the most convenient medium for working, and seems to set accidents, by falling, at defiance.—We refer to the "Portable Self-Sustaining Scaffold," planned and made by Mr. JOHN M. DEARBORN, at No. 40 Essex Street, long and most favorably known to his fellow citizens.—If ever there were a life- and limb-saving apparatus, this is one; and we are glad to know that the worthy inventor, who has made large personal sacrifices to bring it into notice, is likely to reap an abundant reward. None who have used it, are willing ever to employ another sort of staging, for this is at once portable, convenient for every purpose for which a scaffold can be used, is put up without nails, being "self-sustaining," does no injury even to the inside of a decorated hall, and more than all will not give way, and betray those who trust to it for support.

We think we are doing master-builders and painters, as well as the working community generally, a real service in urging the universal adoption of this "life-preserver." It is soon destined, however, to work its way to triumphant success by its own merits, without the written or spoken recommendation of any one—it need only be seen, to be approved.

After this disinterested attempt on our part to save limb and life, never more valuable than to the hard-working mechanic, and, in connection with him, to all of us, we shall confidently count upon escaping the imputation of seeking to multiply cases for surgery by winking at insufficient supports in carpentry, &c. Moreover, we are of that benevolent class who are scrupulous, in winter, about the removal of snow and ice from before our door, or at least are careful to give a faithful coating of ashes, sand or saw-dust. Now this cannot be said of all of our craft; we once heard a gentleman say in slippery (and therefore "*hard*") times, that of eight doors he had just passed, where an icy accusation might be laid, *six* were those of physicians!

He could hardly be blamed for avowing his belief that a conspiracy was in hand or on foot to furnish a crop of bruises, fractures and dislocations. We look upon such culpable individuals as the said "six," as worthy of a more truculent *scaffold* than Dearborn's!

APPLICATION OF CAUSTIC POTASH TO THE INTERIOR OF THE UTERUS. NOTE FROM DR. L. PARKS, JR., IN REPLY TO DR. H. R. STORER.

Messrs Editors,—Your issue of this week contains a note from Dr. H. R. Storer, having for its caption the "Application of Caustic Potash to the interior of the Uterus," referring to the case of Dr. Jones, in which Dr. J. claims to have made such an application; and mentioning the proposal made by Dr. Storer, on a former occasion, of "the local application of caustic potash."

From this the apparent inference is that Dr. Storer had, some time or other, proposed to cauterize the interior of the uterus with potash. Now, the undersigned, when Secretary of the Suffolk District Medical Society, once reported Dr. S. as having, at a certain meeting, expressed an "intention to cauterize the interior of the womb with caustic potash" (see this Journal, Vol. LIV., page 500); a proposal at which the Secretary, in a note, could not "forbear to express his astonishment." *But*, in the record of a subsequent meeting (which record was privately inspected and assented to by Dr. Storer, and the acceptance of which was publicly moved by him), occurs the following passage, viz.: "Dr. Storer explained the purport of the proposition commented upon in the note to be, that he intended 'the application [of potassa fusa] should be made only to the tumor itself, and only to so much of it as could be fairly and safely reached, and that the caustic should then be properly neutralized, not at all implying that he thought potassa fusa a proper agent to be freely* applied "to the interior of the womb."' Dr. Storer, however, did not care 'to retract the statement as made, or in any further way modify it.' It was not of the report of his remarks that he complained, 'although he considered that these had been misinterpreted by the Secretary,' but of the note commenting thereupon." (See this Journal, Vol. LV., page 186.)

As to the idea, then, of cauterizing the interior of the uterus, does Dr. Storer, or does he not, claim it as his thunder? If he does, why his statement just quoted from page 186, Vol. LV.? If he does not, why re-open the discussion? L. P., Jr.

88 *Dover Street, Nov. 20th*, 1857.

POLYPUS OF THE UTERUS.—NOTE FROM DR. BARTLETT.

Messrs. Editors,—Regard for the interests of medical science prompts me to question the correctness of the diagnosis in the case reported in the Journal of the 2th inst., under the caption of "Cauterization of the interior of the Uterus for Polypus." Had it been a case of polypus, cauterization would not have been necessary, for that non-malignant growth invariably yields to the ligature, the whole sloughing, and without re-production. The discharge incident to polypus is not peculiarly *offensive*, and that symptom, with the tenderness over the uterus, and the irregular enlargement of that organ, leads to the conclusion that the disease was malignant.

Exeter, N. H., Nov. 19th, 1857. Yours, &c. Ezra Bartlett.

* Dr. Jones says he applied potassa c. calce "*freely* to the origin of the polypus, that having been removed as thoroughly as possible"; assuming said origin to be in the "cavity of the uterus."

OUR LATE EDITORIAL ON THE "HYGIENE OF DRESS."

Our *confrère* of the *Virginia Medical Journal*, in his November number, offers to "wager a hundred *pay* subscribers" that the writer of the article, "Hygiene of Dress—Winter Gear," in our issue of October 22d, "is an ugly old bachelor who has no friends." Now we may be very ugly, but we are not a bachelor, and we have friends—a few!

The truth is, friend of the "Old Dominion," we are not, *editorially*, in Wordsworth's phrase, "seven," but we are two: one of us, alas! is a bachelor—but the other has been rescued from that abyss of misery. We will, however, according to your offer, just take that "cool hundred"! We can produce satisfactory testimony in proof that a Benedick wrote the article in question; and though we fail to see in it aught but what breathes the most genuine spirit of devotion to the weal of the fair, nor anything which would not do credit (for its intentions) to the ugliest or the handsomest "bachelor," we are willing to defer to our brother Editor's opinion in the matter, for the sake of the goodly number of subscribers he is bound in honor to transfer to us. We will, moreover, be generous and large-hearted: we will not require him to resign his subscribers wholly, but only to send us the amount of the subscription-money for one year. This, we insist, is only fair under the circumstances! 'Tis passing strange how the wisest heads are sometimes mistaken in their decisions. We await payment, anxiously. Boston bills will be received in lieu of specie.

The total number of deaths registered in London for the week ending Oct. 17th, was 1003, of which 507 were deaths of males, 496 those of females. The average, compared with the last ten years, would have been 1118. The births were numerous, and exceeded the deaths by 782.

Health of the City.—The most striking feature in the mortality of the past week is the large number of deaths from pneumonia, no less than 11 having been reported. The late sudden changes of temperature, acting upon a number of subjects predisposed to the disease by influenza and bronchitis, have doubtless been the cause of this increase. We hear of many cases of typhoid fever, but hitherto it has been of a mild character. The mortality from scarlatina presents a striking contrast to the ravages of that epidemic a year since. The total number of deaths for the corresponding week of 1856 was 91, of which 25 were from scarlatina, 13 from consumption and 6 from pneumonia.

Communications Received.—Recovery of an Infant after taking two grains of Opium.—On some Ancient Medical Delusions, and their connection with Errors still existing.

Books and Pamphlets received.—A Dictionary of Medical Science, &c., by Robley Dunglison, M.D., &c. Revised and very greatly enlarged. (From Blanchard & Lea.)—Scriptural Evidence of a General System of Medical Practice being taught in the Bible, and a comparison of this system with Rational Medicine and Homœopathy, by N. D. Sebbins, M.D. (From the author.)

Deaths in Boston for the week ending Saturday noon, November 21st, 82. Males, 47—Females, 35.—Accident, 1—apoplexy, 1—inflammation of the bowels, 2—bronchitis, 3—congestion of the brain, 2—disease of the brain, 2—burns, 1—cancer, 2—consumption, 16—convulsions, 1—cholera infantum, 1—croup, 4—diarrhœa, 2—dropsy in the head, 3—drowned, 1—debility, 2—erysipelas, 1—typhoid fever, 2—scarlet fever, 2—disease of the heart, 4—disease of the hip, 1—inflammation of the lungs, 11—congestion of the lungs, 1—disease of the liver, 3—marasmus, 2—old age, 2—pleurisy, 1—rheumatism, 1—thrush, 3—unknown, 2—whooping cough, 4.

Under 5 years, 33—between 5 and 20 years, 7—between 20 and 40 years, 17—between 40 and 60 years, 18—above 60 years, 7. Born in the United States, 47—Ireland, 30—other places, 5.

Medical Classes in St. Louis.—The number of students at present in attendance in our Medical Colleges is considerably greater than at a corresponding period last year, and the probabilities are that we shall have larger classes this winter. The "hard times," which are bearing so heavily on the commercial interests of the land, seem not to have reached the farmers in the country, and will in all probability not affect the Medical Schools injuriously. Indeed, we believe it will hold true, as a general rule, that when a check is given to commerce and speculation, the effect will be to increase, rather than to diminish, the number of those seeking admission to the learned professions, as by these reverses men are brought to realize the fact that the slow way of making a living is, after all, the better way.

The public Introductory Lecture before the class in the St. Louis Medical College was delivered on Monday evening, Nov. 2d, by Prof. Charles W. Stevens; and that before the Missouri Medical College on Tuesday evening, Nov. 3d, by Prof. S. G. Armor.—*St. Louis Med. and Surg. Journal.*

Green Color in Paper Hangings.—A few weeks since, some observations appeared in the "Lancet" respecting the injurious effects resulting from the use of green papers, colored with some green salt containing arsenic, usually the arsenite of copper or Scheele's green. Our attention has recently been directed to this subject, and, as it is one of considerable importance, we have instituted a few experiments, in order to ascertain how far the opinions expressed in regard to these green papers is correct or otherwise. We find that the arsenite of copper does not sublime at ordinary temperatures. This fact was first ascertained by experiments upon some of the pigment itself, and next with some papers manufactured by Mess. Haigh, Walker & Co., of Manchester. Some large boxes were lined with these papers; they were exposed for some days to a temperature of 110 deg. Fahr., and finally the atmosphere contained in them was tested for arsenic, which was not present in any case. We are, therefore, of opinion that green papers containing arsenic, when carefully manufactured and well sized, may be employed with safety in the papering of rooms. There is one precaution, however, which ought to be observed—that is, not to make use of the room for a few days after it has been papered, and until it has been well ventilated, and this for the following reason: During the operation of papering, some of the arsenical pigment becomes mechanically detached, and is suspended for a time in the atmosphere of the room, and is of course inhaled by those who occupy it. We are inclined to attribute to this cause some of the injurious results stated to have followed the papering of rooms with certain descriptions of green paper.—*London Lancet.*

Nitrate of Silver in Toothache.—The common methods of destroying the nerve in a tooth without extracting it, are the application of nitric or sulphuric acid, or a red-hot wire, but these are very painful expedients.

Some time ago I tried the application of a small piece, about the size of a pin-head, of stick caustic (nitrate of silver) in the hollow of a decayed tooth, from which I was suffering extreme pain. To my great surprise the pain instantly ceased on the caustic touching the nerve, and I had not a return of the toothache for twenty-four hours: when I again applied the caustic, and again got immediate relief, which continued other twenty-four hours. I had occasion to make a third application of the caustic, but since that time, now some months ago, I have not been troubled with the toothache.

This cure will be found ineffectual if gum-boils accompany the toothache, for in that case the decayed part of the tooth is on the outside of it, and therefore the application of the caustic to the interior of the tooth can do no good.—Dr. James Johnstone, in *London Lancet.*

Dr. N. D. Benedict states, in the N. Y. Times, that the epidemic which has been prevailing in Jacksonville, Fa, is confined to that place, and that other parts of the State are remarkably healthy.—Two persons have been arrested in New York on suspicion of being the parties who attempted to garrote Dr. Alex. B. Mott, on the 20th inst.—Dr. Joseph T. Curtis, a homœopathic physician of New York, committed suicide recently, in his own office, by shooting himself through the heart with a pistol. He was a native of Danbury, Conn.